

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

LOUISIANA FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

228 Saint Charles Avenue

Suite 1024

☐ Check if different than previously reported. (ACC)

New Orleans

LA

70130

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00144170

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☒ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Hans Sternberg

Signature of Treasurer

Hans Sternberg

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

LOUISIANA FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y Y 04 / 01 / 2014 To: M M / D D / Y Y Y Y Y 06 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</span> 2014		187125.99
(b) Cash on Hand at Beginning of Reporting Period.....	200197.72	
(c) Total Receipts (from Line 19) .....	13425.39	37307.32
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	213623.11	224433.31
7. Total Disbursements (from Line 31) .....	8720.46	19530.66
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	204902.65	204902.65
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

LOUISIANA FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
04	/	01	/	2014

To:

M M	/	D D	/	Y Y Y Y
06	/	30	/	2014

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

12575.00

33375.00

(ii) Unitemized .....

495.00

2911.49

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

13070.00

36286.49

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

13070.00

36286.49

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

355.39

1020.83

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

13425.39

37307.32

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

13425.39

37307.32

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	176.04	2614.04
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	176.04	2614.04
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8500.00	16000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	44.42	916.62
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8720.46	19530.66
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8720.46	19530.66

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	13070.00	36286.49
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	13070.00	36286.49
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	176.04	2614.04
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	176.04	2614.04

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**LOUISIANA FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. David Abraham**

Mailing Address 3040 Ambassador Caffery Pkwy  
Suite 200

City State Zip Code  
Lafayette LA 70508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 21 / 2014

**Transaction ID : SA11AI.5622**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. Harold Asher**

Mailing Address 400 Poydras Street  
Suite 2640

City State Zip Code  
New Orleans LA 70130

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 19 / 2014

**Transaction ID : SA11AI.5624**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. Richard Cahn**

Mailing Address Post Office Box 52005

City State Zip Code  
New Orleans LA 70152

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Dixie Mill Supply Co., Inc.

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 11 / 2014

**Transaction ID : SA11AI.5620**

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

4500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**LOUISIANA FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Alan Franco**

Mailing Address 809 Jefferson Highway

City State Zip Code  
 New Orleans LA 70121

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Magnolia Marketing

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 03 / 2014

**Transaction ID : SA11AI.5618**

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

**B. Diane Franco**

Mailing Address 809 Jefferson Highway

City State Zip Code  
 New Orleans LA 70121

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Professional Volunteer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 03 / 2014

**Transaction ID : SA11AI.5619**

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

**C. Reuben Friedman**

Mailing Address 993 Crystal Street

City State Zip Code  
 New Orleans LA 70124

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2014

**Transaction ID : SA11AI.5629**

Amount of Each Receipt this Period

400.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2900.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
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PAGE 8 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**LOUISIANA FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Joyce Goldstein**

Mailing Address 1615 Frankfort Street

City State Zip Code  
 New Orleans LA 70122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : SA11AI.5627**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Maury Herman**

Mailing Address 820 O'Keefe Ave

City State Zip Code  
 New Orleans LA 70113

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Herman, Herman, Katz & Kotlar

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : SA11AI.5632**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. Brian Katz**

Mailing Address 1818 Valence Street

City State Zip Code  
 New Orleans LA 70115

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 29 / 2014

**Transaction ID : SA11AI.5630**

Amount of Each Receipt this Period

325.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1125.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**LOUISIANA FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. Herman Kohlmeier**

Mailing Address 900 State Street

City

New Orleans

State

LA

Zip Code

70118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

A. G. Edwards & Sons

Occupation

Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

04 / 10 / 2014

Transaction ID : SA11AI.5631

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

## **B. Donald Meltzer**

Mailing Address 1722 Pollard Parkway

City

Baton Rouge

State

LA

Zip Code

70808

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 03 / 2014

Transaction ID : SA11AI.5626

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. Mitchell Mintz**

Mailing Address 1751 Airline Drive

City

Metairie

State

LA

Zip Code

70001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hurwitz Mintz Furniture

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 29 / 2014

Transaction ID : SA11AI.5628

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**LOUISIANA FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Morris Mintz**

Mailing Address Post Office Box 6058

City State Zip Code  
 Monroe LA 71211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Strauss Interests

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 06 / 18 / 2014

Transaction ID : SA11AI.5621

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. Alvin Rotenberg**

Mailing Address 2773 Bocage Court  
 Apt. E

City State Zip Code  
 Baton Rouge LA 70809

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

LA Chemical Equipment Co., Ltd

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 04 / 10 / 2014

Transaction ID : SA11AI.5625

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Ben Schieber**

Mailing Address 338 Stanford Avenue

City State Zip Code  
 Baton Rouge LA 70808

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Louisiana State University

Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 19 / 2014

Transaction ID : SA11AI.5633

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

2750.00

**TOTAL** This Period (last page this line number only)..... ►

12575.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 15

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**LOUISIANA FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. First NBC**

Mailing Address 210 Baronne Street

City State Zip Code  
 New Orleans LA 70112

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

784.00

Date of Receipt

04 / 30 / 2014

**Transaction ID : SA17.5654**

Amount of Each Receipt this Period

118.56

Interest Income

Full Name (Last, First, Middle Initial)

## **B. First NBC**

Mailing Address 210 Baronne Street

City State Zip Code  
 New Orleans LA 70112

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

902.14

Date of Receipt

06 / 01 / 2014

**Transaction ID : SA17.5656**

Amount of Each Receipt this Period

118.14

Interest Income

Full Name (Last, First, Middle Initial)

## **C. First NBC**

Mailing Address 210 Baronne Street

City State Zip Code  
 New Orleans LA 70112

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.83

Date of Receipt

06 / 30 / 2014

**Transaction ID : SA17.5657**

Amount of Each Receipt this Period

118.69

Interest Income

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

355.39

355.39

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 15

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**LOUISIANA FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Ferdie's Printing Service**

Mailing Address 3751 Spencer Street

City Harvey                      State LA                      Zip Code 70058

Purpose of Disbursement  
Supplies

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President  
State:                      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05                      02                      2014
**Transaction ID : SB21B.5651**

Amount of Each Disbursement this Period

176.04

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City                                      State                                      Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President  
State:                      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City                                      State                                      Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President  
State:                      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

176.04

176.04

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**LOUISIANA FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CITIZENS FOR COCHRAN**

Mailing Address PO BOX 7183

City  
TUPELOState  
MSZip Code  
38802

Purpose of Disbursement

Candidate Name

**THAD COCHRAN**

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2014

☒ Primary☐ General☐ Other (specify) ▼

State: MS

District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		23		2014

**Transaction ID : SB23.5642**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**B. HANABUSA FOR HAWAII**

Mailing Address P.O. BOX 1416

City  
HONOLULUState  
HIZip Code  
96806

Purpose of Disbursement

Candidate Name

**COLLEEN WAKAKO HANABUSA**

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2014

☒ Primary☐ General☐ Other (specify) ▼

State: HI

District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		23		2014

**Transaction ID : SB23.5639**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. JONI ERNST FOR US SENATE INC**

Mailing Address PO BOX 93441

City  
DES MOINESState  
IAZip Code  
50393

Purpose of Disbursement

Candidate Name

**JONI K ERNST**

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2014

☐ Primary☒ General☐ Other (specify) ▼

State: IA

District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		20		2014

**Transaction ID : SB23.5648**

Amount of Each Disbursement this Period

3000.00
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6500.00
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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

LOUISIANA FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE

### A. PALAZZO FOR CONGRESS

Date of Disbursement

Transaction ID : SB23.5645

Amount of Each Disbursement this Period

STEVEN MCCARTY PALAZZO

Category/  
Type

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MS District: 04

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City	State	Zip Code
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### Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City	State	Zip Code
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### Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

2000.00

**TOTAL** This Period (last page this line number only).....

8500.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**LOUISIANA FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Internal Revenue Service**

Mailing Address IRS Service Center

City	State	Zip Code
Austin	TX	

Purpose of Disbursement  
Federal Tax

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2014

**Transaction ID : SB29.5653**

Amount of Each Disbursement this Period

44.42
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**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

44.42
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44.42
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